ARIZONA FORM 120A

2001

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			Mail	to: Arizo	ona Department	of Reve	enue, PO E	Box 29079,	Phoen	ix Az	85	038-90	79		Cale	endar	CHECK ONE: year Fisca		
Business telephone number			Please								eral ei	mployer ID num	ber (FEI	N)					
Business activity code number (from federal Form 1120)		Type or Print	Number and street AZ v							withholding tax number									
			City, or town, state, and ZIP code						AZ transaction privilege tax number					er					
68		Check box if:	This is a	first ret	turn 🔲 Name	e chan	ge 🔲 /	Address c	hange						FOR D	OR USE	ONLY		
Α	ı	s FEDERAL return filed or	n a consoli	dated ba	asis?		☐ Yes	1 🔲 a	No										
	ı	f yes, list FEIN of common	parent fro	m cons	solidated return.														
	ı	NOTE: Use Form 120 to fi	ile an ARIZ	ZONA co	onsolidated retur	n. Taxr	oayers can	not use											
		Form 120A to file a	an Arizona	consoli	dated return.										\top				
В	ı	Is this the corporation's final ARIZONA return?									_								
		·			W ithdrawn	1 Ме	rged/Reorg			81					6	6			
					_	, Mici	iged/iteorg	unizeu <u>L</u>		82	1		ECK B			-J 1 - E		F	1
_		List FEIN of the successor	corporatio		na Taxable In	come	Computa	ntion		102	<u> </u>	rea	erai ex	ktensi	on use	ea to r	ile return.		_
	1	Taxable income - per atta	iched fede				•									1		Т	00
		Additions to taxable incor														2			00
	3	Total taxable income - ad	,	-												3			00
	4	Subtractions from taxable														4			00
	5	Adjusted income - subtrat			•											5			00
	6	Arizona basis net operation														6			00
		Arizona taxable income -	-													7			00
				Arizo	na Tax Liabili	ty Cor	moutation												_
	Q	Enter tax. Tax is 6.968 p	orcont of			-	•									8			00
	0	Tax from recapture of tax			-			-								9			00
	ر 10	Subtotal - add lines 8 and														10			00
		Clean Elections Fund Tax													••••	10			00
	•	Enter the amount of the to								•	,	,		11 A	П	11			00
	12	Nonrefundable tax credits														12			00
		Credit type - <i>enter form n</i>												3				I.	
		Tax liability - <i>subtract the</i>														14			00
		Clean Elections Fund Tax														15			00
		Tax liability after Clean El														16			00
		<u> </u>			Tax Paym														_
	17	Refundable tax credits - s	saa instruc	rtions	-						17				00	-			
	18	Credit type - <i>enter form n</i>						3			1/	3	1 1	3		-			
	19	Extension payment made									19	<u> </u>		<u> </u>	00	1			
	20	Estimated tax payments -									20				00	1			
	21	Total payments - <i>see inst</i>														21			00
		1 7																	
	າາ	Balance of tax due - If line	ο 16 is lar		putation of To											22		T	00
	23	Overpayment of tax - If lin	-					•								23			00
	23 24	Penalty and interest		-												24			00
	25	Estimated tax underpaym												25 A		25			00
	26	Donation to Citizens Clea	•	-												26			00
	27	TOTAL DUE - payment n														27			00
	28	OVERPAYMENT - see in														28			00
		Amount of line 28 to be a									29				00				
		Amount to be refunded -														30			00

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Sc	hedule A	- Additions to Taxable Income			
A 1	Taxes bas	sed on income paid to any state (INCLUDING ARIZONA), local go	vernments or foreign governments	A1	00
A2	Interest o	n obligations of other states, foreign countries, or political subdivis	ions	A2	00
A3	Special d	eductions claimed on federal return		A3	00
A4	Federal n	et operating loss deduction claimed on federal return		A4	00
A 5	Federal in	ncome tax refunds received in the taxable year - see instructions			00
A6	Commiss	ions and other expenses paid or accrued to a Domestic Internation	nal Sales Corporaton (DISC)	A6	00
Α7	Capital in	vestment by qualified defense contractor - attach schedule		A7	00
A8	Claim of r	ight adjustments - attach schedule			00
Α9	Additions	related to Arizona tax credits - attach schedule		A9	00
A10		litions to federal taxable income - attach schedule			00
A11	Total - aa	d lines A1 through A10. Enter total here and on page 1, line 2			00
Sc	hedule B	- Subtractions From Taxable Income			
В1	Dividends	received from corporations doing 50% or more of their business is	n Arizona	B1	00
B2	Dividends	received from 50% or more controlled domestic corporations		B2	00
В3	Foreign d	ividend gross-up		B3	00
B4	Dividends	received from foreign corporations		B4	00
B5	Dividends	received from a DISC		B5	00
B6	Interest o	n U.S. obligations		B6	00
В7	Agricultur	al crops charitable contribution		B7	00
B8	Capital in	vestment by qualified defense contractor - attach schedule		B8	00
В9	Claim of r	ight adjustments - attach schedule		B9	00
		stractions from federal taxable income - attach schedule			00
B11	Total - aa	d lines B1 through B10. Enter total here and on page 1, line 4		<u>B11</u>	00
C4 C5	Name and List prior NOTE: All cover to to Amount of	eyer designates the individual listed below as the person to contact sure of confidential information to this individual. (See instruction put title	Phone # _()etermination, to report these changes under orting these changes. (See instruction page line 7)	r separate	- - - -
Cei	rtification	The following certification must be signed by one or more of the following the following certification must be signed by one or more of the following the following certification must be signed by one or more of the following certification must be signed by one or more of the following certification must be signed by one or more of the following certification must be signed by one or more of the following certification must be signed by one or more of the following certification must be signed by one or more of the following certification must be signed by one or more of the following certification must be signed by one or more of the following certification must be signed by one or more of the following certification must be signed by one or more of the following certification must be signed by one or more of the following certification must be signed by one or more of the following certification must be signed by one or more of the following certification must be signed by one or more of the following certification must be signed by the following certification mu		•	e
		accompanying schedules and statements, and to the best of my (out the taxable year stated pursuant to the income tax laws of the State		complete return, made in good fa	aith, for
Ple	ase	Officer's signature	Title	Date	
Sign			1	1	
Hei	re	Officer's signature	Title	Date	
Pai		December shows here			
	eparer's e Only	Preparer's signature	Date		
	,	Firm's name (or preparer's, if self-employed)	Dror	oarer's TIN	
		rams name (or preparers, it self-employed)	ı Pieh	ration 3 THV	
		Firm's address	Zip o	code	